



UNIFORM CITATION

STATE OF MISSOURI						DIVISION	
IN THE CIRCUIT COURT OF						COUNTY	
COURT ADDRESS (STREET, CITY, ZIP)							
COURT DATE		COURT TIME		<input type="checkbox"/> AM <input type="checkbox"/> PM		COURT PHONE NO.	
I, KNOWING THAT FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY LAW, STATE THAT I HAVE PROBABLE CAUSE TO BELIEVE THAT:							
ON/ABOUT (DATE)		AT TIME		HWY CLASS		UPON/AT OR NEAR (LOCATION)	
		HRS					
WITHIN CITY/COUNTY AND STATE AFORESAID,							
NAME (LAST, FIRST, MIDDLE)							
STREET ADDRESS							
CITY						STATE	
						ZIP CODE	
DATE OF BIRTH		AGE		RACE		SEX	
						HEIGHT	
						WEIGHT	
DRIVER'S LIC. NO.						CDL	
						<input type="checkbox"/> YES <input type="checkbox"/> NO	
STATE							
LEAVE THIS LINE BLANK							
EMPLOYER							
ADDRESS (STREET, CITY, STATE, ZIP)							
DID UNLAWFULLY <input type="checkbox"/> OPERATE/DRIVE <input type="checkbox"/> PARK <input type="checkbox"/> C.M.V. <input type="checkbox"/> WITH HAZ MAT							
VEHICLE	YEAR		MAKE		MODEL		STYLE
							COLOR
	REGISTERED WEIGHT		L I C	NUMBER		STATE	
						YEAR	
DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE. THE FACTS SUPPORTING THIS BELIEF ARE AS FOLLOWS:							
.....							
<input type="checkbox"/> Subject taken into custody. (Complete "For Issuance of a Warrant" section on reverse side.)							
DRIVING		POSTED SPEED LIMIT		DETECTION METHOD			
MPH		MPH		<input type="checkbox"/> STATIONARY RADAR <input type="checkbox"/> WATCH (AIR) <input type="checkbox"/> PACE <input type="checkbox"/> MOVING RADAR <input type="checkbox"/> WATCH (GROUND) <input type="checkbox"/> OTHER			
IN VIOLATION OF		<input type="checkbox"/> RSMo <input type="checkbox"/> ORD		CHARGE CODE		<input type="checkbox"/> IN FATAL ACCIDENT <input type="checkbox"/> IN ACCIDENT <input type="checkbox"/> DWI/BAC	
SEAT BELT VIOLATION:		<input type="checkbox"/> ORD <input type="checkbox"/> _____ RSMo		CHARGE CODE			
OFFICER				BADGE		TRP/ZONE	
						DATE	
ON INFORMATION, UNDERSIGNED PROSECUTOR CHARGES THE DEFENDANT AND INFORMS THE COURT THAT ABOVE FACTS ARE TRUE AND PUNISHABLE BY:							
<input type="checkbox"/> RSMo <input type="checkbox"/> ORD							
PROSECUTOR'S SIGNATURE						DATE	
I PROMISE TO DISPOSE OF THE CHARGES OF WHICH I AM ACCUSED THROUGH COURT APPEARANCE OR PREPAYMENT OF FINE AND COURT COSTS.						DR. LIC. POSTED	
SIGNATURE X						<input type="checkbox"/> YES <input type="checkbox"/> NO	

FOR ISSUANCE OF A WARRANT COMPLETE AT LEAST ONE OF THE FOLLOWING:

☐ DEFENDANT WILL NOT APPEAR BECAUSE _____

☐ DEFENDANT POSES A DANGER TO THE VICTIM OR THE COMMUNITY/OTHER PERSON BECAUSE _____

**DOR
USE
ONLY**

VIOL CODE

DESCRIPTION CODE

SENT CODE

LIC SURRENDERED

ADD POINTS

DOR MICROFILM NUMBER

COURT ORI

MO

COURT NAME (SPECIFY COUNTY, DIVISION)

COURT CASE NUMBER

DATE FILED

DATE OF SENTENCE (CONVICTION, SIS)

CHARGE AS DISPOSED

☐ FELONY

☐ MISDEMEANOR

☐ INFRACTION

MO CHARGE CODE

☐ RSMo

☐ ORD

DESCRIPTION OF OFFENSE

FINE ORDERED

\$

DAYS OF CONFINEMENT ORDERED

SEAT BELT CONVICTION

\$

FINE

☐ SUSPENDED IMPOSITION OF SENTENCE (SIS)

☐ SENTENCE SUSPENDED (SES)

PROBATION TERM

DAYS SUSPENDED _____

FINE SUSPENDED _____

MANDATORY INSURANCE

☐ ORDER OF SUPERVISION
DO NOT ASSESS POINTS

☐ ORDER OF SUSPENSION
ASSESS POINTS ☐ YES ☐ NO

☐ DRIVER IMPROVEMENT PROGRAM (IN LIEU OF POINT ASSESSMENT)

LICENSE SURRENDERED AT
CONVICTION

☐ YES ☐ NO

☐ PROPERTY DAMAGE/PERSONAL INJURY RESULTED FROM VIOLATION.
ASSESS TWO ADDITIONAL POINTS.

BOND FORFEITURE
PREVIOUSLY SENT TO DOR

☐ YES ☐ NO

DEFENDANT REPRESENTED BY COUNSEL

☐ YES ☐ NO

DEFENDANT WAIVED RIGHT
TO COUNSEL IN WRITING

☐ YES ☐ NO

NAME OF JUDGE

LAWYER JUDGE

☐ YES ☐ NO

REMARKS

I CERTIFY THIS TO BE A TRUE ABSTRACT OF RECORD IN THIS CASE
NAME AND TITLE

FOR COURT USE ONLY

BOND AMOUNT \$		BOND POSTED BY	
BOND EXPIRES		BOND FORFEITURE NUMBER	REFUND \$
DATE	TIME	TFRD TO	REASON CONTINUED
	<input type="checkbox"/> AM <input type="checkbox"/> PM		
	<input type="checkbox"/> AM <input type="checkbox"/> PM		
	<input type="checkbox"/> AM <input type="checkbox"/> PM		
COURT ORI MO		COURT NAME (SPECIFY COUNTY, DIVISION)	
COURT CASE NUMBER		DATE FILED	DATE OF SENTENCE (CONVICTION, SIS)
CHARGE AS DISPOSED <input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> INFRACTION _____ <input type="checkbox"/> RSMo _____ <input type="checkbox"/> ORD			MO CHARGE CODE DESCRIPTION OF OFFENSE
FINE ORDERED \$		DAYS OF CONFINEMENT ORDERED	SEAT BELT CONVICTION \$ FINE
<input type="checkbox"/> SUSPENDED IMPOSITION OF SENTENCE (SIS)		<input type="checkbox"/> SENTENCE SUSPENDED (SES)	
PROBATION TERM		DAYS SUSPENDED _____ FINE SUSPENDED _____	
MANDATORY INSURANCE <input type="checkbox"/> ORDER OF SUPERVISION DO NOT ASSESS POINTS <input type="checkbox"/> ORDER OF SUSPENSION ASSESS POINTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
<input type="checkbox"/> DRIVER IMPROVEMENT PROGRAM (IN LIEU OF POINT ASSESSMENT)			
LICENSE SURRENDERED AT CONVICTION <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> PROPERTY DAMAGE/PERSONAL INJURY RESULTED FROM VIOLATION, ASSESS TWO ADDITIONAL POINTS.	
BOND FORFEITURE PREVIOUSLY SENT TO DOR <input type="checkbox"/> YES <input type="checkbox"/> NO		DEFENDANT REPRESENTED BY COUNSEL <input type="checkbox"/> YES <input type="checkbox"/> NO	DEFENDANT WAIVED RIGHT TO COUNSEL IN WRITING <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF JUDGE			LAWYER JUDGE <input type="checkbox"/> YES <input type="checkbox"/> NO
REMARKS			
PLEA <input type="checkbox"/> GUILTY <input type="checkbox"/> NOT GUILTY		FINDING <input type="checkbox"/> GUILTY <input type="checkbox"/> NOT GUILTY	COURT COSTS \$

NAME OF JUDGE
DISPOSITION
DATE